

YOUTH CONSERVATION CORPS (YCC) APPLICATION

Print or Type all answers. All questions and statements must be answered to enable Selection Office to determine applicant's eligibility and availability. *Incomplete applications may have to be rejected.* Authority is PL 93-408. You must be at least 15 years of age and not have reached age 19 during the term of employment.

Name (Last, First, Middle Initial)

Mailing Address (Street or P.O. Box)

City

State

Zip Code

____-____-____
Social Security Number

Male____ Female____

____-____-____
Area Code Telephone Number

Date of Birth

____-____-____
Month Day Year

Participants to the YCC program will do hard physical work at high elevations, adverse weather, difficult working conditions.

Applicant's Statement

I am familiar with the YCC program and interested in working in the outdoors to develop and maintain the natural resources of the United States. If selected, I will obtain a work permit if required. I have or am applying for a social security number. I am a permanent resident of the United States or its Territories or possessions. I do not have a history of serious criminal or other antisocial behavior that might jeopardize my safety or that of others. I certify that all information I have given above is true and correct to the best of my knowledge. Incorrect statements constitute grounds for immediate dismissal. You have my permission to give this application to any YCC official for whose camp I am selected.

(Signature of Applicant)

(County)

I am familiar with the YCC program and the applicant has my permission to participate.

(Signature of Parent or Guardian)

(Date)

YCC is an Equal Opportunity Employer Please send completed applications to:
YCC Coordinator P.O.Box 700, El Portal Ca. 95318 Due Date: 3/31